## P15000083639

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## COVER LETTER

**TO:** Amendment Section Division of Corporations

NAME OF CORPORA	TION: Executive RIDE	TRANSPORT INC			
DOCUMENT NUMBE	D15000093630				
The enclosed Articles of	Amendment and fee are su	ibmitted for filing.			
Please return all correspo	ondence concerning this ma	tter to the following:			
		SMITH PETIT			
_	Name of Contact Person				
EXECUTIVE RIDE TRANSPORT INC					
_	Firm/ Company				
21	70 BLOUNT ROAD	. ,			
<u></u>		Address			
PC	MPANO BEACH FL				
<del>_</del>		City/ State and Zip Cod	e		
EXRIDI	ETRANSPORT@YAHOO	.СОМ			
	E-mail address: (to be us	sed for future annual report	notification)		
For further information of PENELOPE PINHEIRO	oncerning this matter, pleas	se call: at ( <sup>954</sup>	<b>.</b> 2267948		
Name of Contact Person		at (	de & Daytime Telephone Number		
		payable to the Florida Depa			
■ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)		
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Street Address  Amendment Section  Division of Corporations  Clifton Building  2661 Executive Center Circle  Tallahassee, FL 32301			

## Articles of Amendment to Articles of Incorporation of

(Name o	f Corporation as currently file	<u>d with the Florida De</u>	ept. of State)	
P15000083639				
	(Document Number of Corp	poration (if known)		
Pursuant to the provisions of section 607. its Articles of Incorporation:	1006, Florida Statutes, this <i>Flori</i>	da Profit Corporation	adopts the follow	ring amendment(s) to
A. If amending name, enter the new na	me of the corporation:			
				The new
name must be distinguishable and cont "Corp" "Inc.," or Co" or the design word "chartered," "professional associa	ation "Corp," "Inc," or "Co".	A professional corpo	porated" or the pration name mus	abbreviation
B. Enter new principal office address,				7 6 EE
(Principal office address <u>MUST BE A ST</u>	TREET ADDRESS )			等 建气
	_			<del></del>
	_			
C. Enter new mailing address, if appli				51,
(Mailing address MAY BE A POST (	OFFICE BOX)			<del></del>
	_		<del></del>	
D. If amending the registered agent an		n Florida, enter the n	ame of the	
new registered agent and/or the nev				
Name of New Registered Agent	SMITH PETIT			
	2170 BLOUNT ROAD			
	(Florida street aa	ldress)		
No. 1 Project of 1000 and 1 diameter	POMPANO BEACH FLORIDA		. Florida 33069	
New Registered Office Address:	(City)		(Zip Code)	
New Registered Agent's Signature, if cl I hereby accept the appointment as regist				

Page 1 of 4

Signature of New Registered Agent, if changing

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

Please note the officer/director title by the first letter of the office title:

P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: X Change	<u>PT</u>	John Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	Address
C Change	PRES	PENELOPE PINHEIRO	1140 NW 44TH TERRACE
Add			LAUDERHILL FL 33313
Remove			
2) Change	PRES	PENELOPE PINHEIRO	2170 BLOUNT ROAD
Λ Add			POMPANO BEACH
Remove			FL 33069
3 ) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change	<del></del>		
Add			
Remove			

f amending or adding additional Arti Attach additional sheets, if necessary).	(Be specific)
	<del></del>
-	
f an amendment provides for an exch provisions for implementing the amen (if not applicable, indicate N/A)	ange, reclassification, or cancellation of issued shares, adment if not contained in the amendment itself:
W	

	3-1-2017	
The date of each amendment(s) a		_, if other than the
date this document was signed.,		
	2017	
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	
	(no more than 90 days after amenament file date)	
Note: If the date inserted in this document's effective date on the De	block does not meet the applicable statutory filing requirements, this date will epartment of State's records.	not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adby the shareholders was/were st	opted by the shareholders. The number of votes cast for the amendment(s) afficient for approval.	
☐ The amendment(s) was/were apmust be separately provided for	proved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):	
"The number of votes cast	for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
☐ The amendment(s) was/were ad action was not required.	opted by the board of directors without shareholder action and shareholder	
☐ The amendment(s) was/were adaction was not required.	opted by the incorporators without shareholder action and shareholder	
Dated		
	a o Die	
Signature	encloses linheuro	
Signature(By a c	lirector, president or other officer – if directors or officers have not been	_
selecte	ed, by an incorporator – if in the hands of a receiver, trustee, or other court	
	ated fiduciary by that fiduciary)	
	PENELOPE PINHEIRO	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	